WASTE RECEIPT # 96	05577
SHIPPER ID#	

GENERATOR Centralia	Mining
MANIFEST # 49132	J

DRUM #		DESCRIPTION		% OF % OF SOLIDS SLUDGE			% OF I IQUID		DRUM		TOTAL GALLONS		PROFILE #		STORAGE LOCATION			
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1487859

DATE 4-30-99

RECEIVERS SIGNATURE M. LE COLOR

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		egnication (file) A Single for Use on edit, id a plent hours of single	Emergency Contact Tele	phone Number								
		UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1	Information in the shaded areas not required by Federal law.	is					
	3.	. Generator's Name and Mailing Address	Centralia Mini 1015 Big Hanafe Centralia wa	ng Company	A. State N	Manifest Document Number	_					
		Generator's Phone (360) 736 283. Transporter 1 Company Name		98531 A ID Number		B. State Generator's ID						
	1	Clean Care Corp Transporter 2 Company Name	WA. D. 9.8.	8. 4.7 . 7. /. 4.7 A ID Number	D. Transpo	C. State Transporter's ID D. Transporter's Phone						
The same of	9.	Designated Facility Name and Site Address		A ID Number	r. Hanspo	E. State Transporter F. Transporter's Ph G. State Facility's 1						
		Clean Care Corporation 1510 Taylor Wy	W. 4 A G G		H Encility	H. Facility's Phone						
	11.	Tacome WN 98421 US DOT Description (Including Proper Shipping	Name, Hazard Class, and ID Number)	0.7.3 8.5.1.2 12. Con	Annual Control of the	13. 14. Tote Unit	4					
	a.	NON Regulated mate	erial	Nd.	Туре		Vol Waste No.					
GE	b.			1.0.	C.F							
MZHK.	C.	1										
ATOR	0.											
	d.		7	,								
	J. A	Additional Descriptions for Materials Listed Above	K. Handling Codes for Wastes Listed Above									
	The second of th											
	15.	Special Handling Instructions and Additional Information	######################################	G # NA		1						
	16 6	CENEDATORIS OF DIVISION AND AND AND AND AND AND AND AND AND AN										
	1	GENERATOR'S CERTIFICATION: I hereby declare packed, marked, and labeled, and are in all respects in If I am a large quantity generator, I certify that I have practicable and that I have selected the practicable m	a program in electric district di	occording to applicable inter	national and n	ational governmental regulations.	100					
	8	practicable and that I have selected the practicable m and the environment; OR, if I am a small quantity ger available to me and that I can afford. Printed/Typed Name	ethod of treatment, storage, or disposal curr lerator, I have made a good faith effort to mi	ently available to me which nimize my waste generation	minimizes the	present and future threat to human hea he best waste management method that	ally ofth t is					
V	/_	Transporter 1 Acknowledgement of Receipt of Mate	Signature	- Ual	l	Month Day Ye	ear					
RANSP		Printed/Typed Name	Signature	M	4	Month Day Ye	ear					
P		Transporter 2 Acknowledgement of Receipt of Mate Printed/Typed Name	erials Signature	Maysper	Month Day							
ER	19. D	9. Discrepancy Indication Space										
FACI												
1	20. Fa	acility Owner or Operator: Certification of receipt	of hazardous materials covered by this m	anifest except as noted in	Item 19.							
	P	Trinted/Typed Name Alke Deccon J	Signature	100	100	Month Day Yea	ar					
		2. 10 10 10 10 10 10 10 10 10 10 10 10 10	PICCITI	T Villa	11/1/1	1 11 5 00	page 1					